

of Graal, who has observed an epidemic of beri-beri among the Annamites and Japanese in New Caledonia. Meyer claims that in the Dutch East Indies the troops in the field are attacked with beri-beri because the dietary consists largely of salted meat. One may cite as against this hypothesis the fact that many epidemics of beri-beri occur among patients who have not eaten any sort of meat.

The cause is white or shelled rice. According to Eykmann, a badly preserved rice does not give rise to the disease in the proportion that the fresh rice does. Therefore, we cannot hold the disease due to an alteration of the alimentary material. According to this, beri-beri would be due to the consumption of white or shelled rice. This was found to be the case in a minute investigation which the Dutch physicians have made in the prisons of Java and the French expeditions have had the same experience. Eykmann produced paralysis in chickens which were fed on white or shelled rice. Red rice, or the non-shelled (named thus because of the red pellicle with which it is covered) does not produce this result.

The disease develops with surprising regularity in chickens fed on ordinary rice, either raw or cooked. In about three or four weeks the paralysis manifests itself first by a reeling gait and increase in the rapidity of the pulse. Soon the animal seems to be in pain, finally it falls and is incapable of rising and lies upon its side. A few days after the chicken is stricken with the disease it is impossible for it to either eat or drink. This is produced by the intense dyspnea, the respiration becomes noisy, the crest and the skin take on a cyanotic hue, the temperature falls and the animal dies from the second to the fifth day after the beginning of the disease.

(To be Concluded.)

#### ADDRESS OF DR. KREUTZMANN UPON THE OPENING OF THE NEW GER- MAN HOSPITAL.

Ladies and Gentlemen:—I hope you forgive me, when I say, I am proud. I am proud indeed to welcome you in the new German Hospital, in this magnificent building, which is a monument to the architect, Mr. H. Barth, and his staff, to the mechanics and working men. It is a credit to the men in and outside the board of directors of the German General Benevolent Society, who have labored for years under the greatest difficulties; think of the disaster and the financial crisis! It is a credit to the medical men, who have given their time and thought in planning the hospital. But this new hospital is the crowning success to all this labor. Not only is the building safe, spacious and airy, it is equipped and provided with everything to accomplish successful medical treatment. There is an old saying among physicians: "a cure should be 'cito, certe et jucunde.'" Certainly the conditions in this new hospital are such that it will be possible to restore patients to health quickly, safely and if not exactly agreeably, at least not disagreeably. You have seen the kitchen, this important factor in a hospital; the splendid arrangement to convey the food to the patients, to keep food and dishes warm. We have besides such a fine body of nurses, whose presence alone is bringing comfort to the patients.

We are going to move into this great building in a few days, and the rooms and facilities of the hospital will be open to the medical profession. It behooves well on this occasion to say a few words more to you as colleagues. I know well that there exists among the profession an ill feeling against the German Hospital. Some would like to call it "unfair house," and there is talk about contract practice. Now I am connected with this German General Benevolent Society, and the German Hospital for eighteen years, and I have seen a few things dur-

ing that time inside and outside the hospital.

There was a time when patients were admitted not only to the German Hospital but to other hospitals as well, who paid a few dollars and had for this the hospital maintenance, medicine, nursing and the doctor's service with operation when necessary all thrown in the bargain. This sort of a thing could not last; by patiently working, aided by the progressive majority of the directors, step by step we abolished this, and for some time now the practice has been established, that patients are paying the hospital for maintenance only, for medical service they have to make their terms with the visiting physician.

There still exists the reproach that the German General Benevolent Society is doing objectionable lodge practice; true, there are well to do people in this great German General Benevolent Society, who are not ashamed to take all they can get out of the society. They are on the same line with those who go to free dispensaries, which are meant only for the deserving poor. These things are hard to avoid, dispensaries are a necessity; such societies as the German General Benevolent Society are a necessity and this very German General Benevolent Society, which can look back for more than fifty years, has done an enormous amount of good in general charity work and in its hospital during that time.

I am fully convinced from my past experience, that progress will be made and steps will be taken to weed out anything really objectionable to the medical profession. Such a magnificent institution as this German Hospital must be standing on the highest principles of medical ethics; it cannot exist in any other way.

I again wish to thank you in the name of the board of the directors of the German General Benevolent Society and in the name of the hospital staff for the interest you have shown in the hospital by coming here to-night and we invite your co-operation without prejudice to the end that the new German Hospital may be a factor in the advancement of medical knowledge and a home for the cultivation of the noble art of healing.

#### SANTA CLARA COUNTY.

The regular Society meeting was held at San Jose Aug. 19th, with twenty-five members present. The guests of the Society were Dr. W. C. Rucker, U. S. P. H. S.; Dr. Boxmeyer, Dr. Benepe, Dr. Jessie Simpson and Dr. La Breck. Dr. John McMahon read a report of a case of Pyelo-Lithotomy. Dr. Rucker gave a paper on Beri-Beri. Dr. Rucker's paper was a translation on the subject by Dr. Le Dantec of France. Drs. Snow and Boxmeyer reported on the Typhoid Situation at Palo Alto. The Society granted Dr. Hindman of Morgan Hill, a transfer to the Los Angeles Society. After a general discussion of the papers presented, the Society adjourned to the banquet hall where a delicious repast was served.

K. C. PARK, Secretary.

#### SONOMA COUNTY.

The regular Society meeting, held at Petaluma Aug. 13th, 1908, was a good one. Dr. J. H. McLeod in the chair; Drs. W. J. Kerr, G. W. Mallory, J. C. Condit, W. C. Shipley, A. R. Graham, Smith McMullin, S. Z. Peoples, visitors; Dr. J. E. Maddux and Dr. Ed. Southerland of San Diego, and Dr. Winslow Anderson. Dr. Anderson's subject was Dysmenorrhea-Etiology, Pathology, Symptoms and Surgical treatment.

The Doctor reduced the subjects to five heads:

- I. Neuralgic,
- II. Congestive,
- III. Obstructive,
- IV. Ovarian,
- V. Membranous.